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Bib Data Sheet

CONFIRMATION NO. 9159

|                             |  |              |                        |                                     |
|-----------------------------|--|--------------|------------------------|-------------------------------------|
| SERIAL NUMBER<br>10/500,053 | FILING OR 371(c)<br>DATE<br>06/24/2004<br>RULE | CLASS<br>062 | GROUP ART UNIT<br>3744 | ATTORNEY<br>DOCKET NO.<br>055/04085 |
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**APPLICANTS**

Mordechai Forkosh, Haifa, ISRAEL;  
 Dan Forkosh, Atlit, ISRAEL;  
 Tomy Forkosh, Haifa, ISRAEL;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/IL01/01207 12/27/2001

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**\*\* SMALL ENTITY \*\***

|                                 |   |                            |                        |                    |                         |
|---------------------------------|---|----------------------------|------------------------|--------------------|-------------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input type="checkbox"/> no  | STATE OR COUNTRY<br>ISRAEL | SHEETS<br>DRAWING<br>4 | TOTAL CLAIMS<br>23 | INDEPENDENT CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                            |                        |                    |                         |
| Verified and Acknowledged       | Examiner's Signature _____ Initials _____   |                            |                        |                    |                         |

**ADDRESS**

William H Dippert  
 Reed Smith  
 599 Lexington Avenue  
 29th Floor  
 New York , NY 10022-7650

**TITLE**

High efficiency dehumidifiers and combined dehumidifying/air-conditioning systems

|                            |   |   |
|----------------------------|---|---|
| FILING FEE RECEIVED<br>487 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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